



MANUEL PORTILLO

**CASA  
DE  
SAUD**  
YOUTH CENTER

# NATIONAL CITY

## ESPORTS

NEXT LEVEL GAMING



### SIGN UP

&

### INFORMATIONAL

### PACKET

## ***LEARNING S.T.E.A.M. THROUGH ESPORTS***



**THIS PROGRAM WILL  
INCLUDE COMPETITIVE  
GAMING AS WELL AS  
THESE S.T.E.A.M.  
ORIENTATED LEARNING  
PROJECTS:**

- 3-D PRINTING**
- BROADCASTING AND  
COMMENTATING**
- PRINT GRAPHICS AND  
STICKERS USING A  
"CRICUT" MACHINE**
- LEARN ABOUT  
BLOCKCHAIN  
TECHNOLOGY**
- BUILDING COMPUTERS  
AND LEARING COMPUTER  
COMPONENTS**

**GAMES CURRENTLY  
AVAILABLE  
FOR COMPETITIVE  
GAMING**

**SUPER  
SMASH BROS.™  
ULTIMATE**



**MORE COMING SOON!**

**PLEASE FILL OUT PREFERRED  
GAMES SURVEY AT THE END OF  
THIS PACKET.**

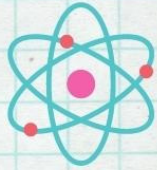


# NC ESPORTS PROGRAM

Electronic Sports as a Bridge to STEAM

## What is STEAM?

Science



Technology



Engineering



Arts



Mathematics



Gaming requires many different academic disciplines to come together to create something engaging. Student gamers can learn what goes into games and see how important STEAM is to producing a video game. Because of this, Esports is a great bridge to learn STEAM.

# Building Valuable Career Skills of the Future In Eports



**NASEF**  
NORTH AMERICA SCHOLASTIC  
ESPORTS FEDERATION™  
*Game. Grow. Learn. Lead.™*

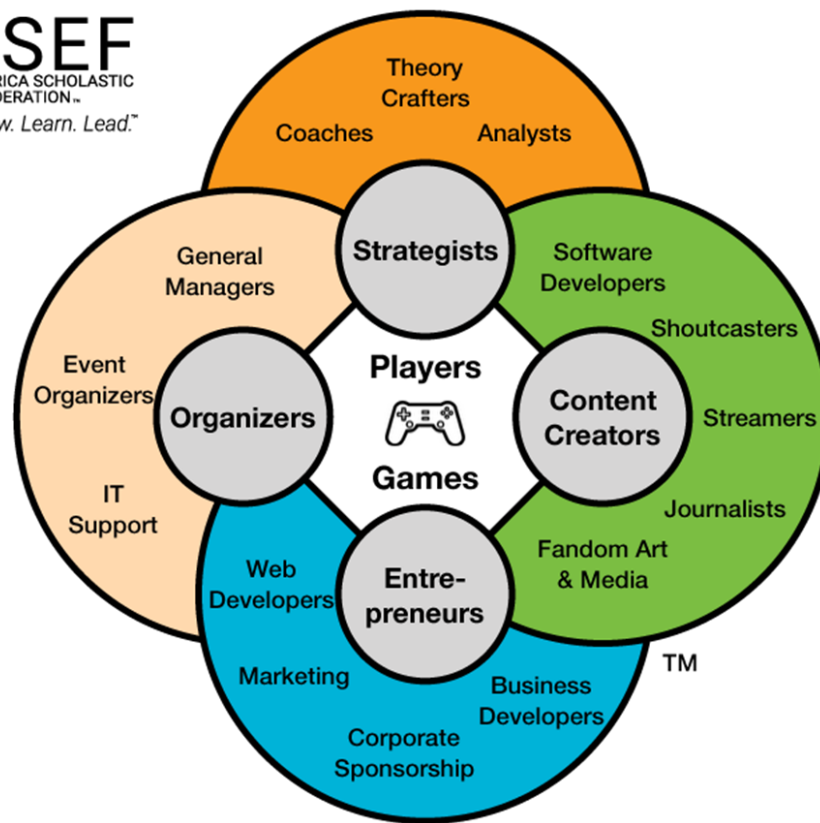


Diagram Citation: Anderson, Tsaasan, Reitman, Lee, Wu, Steele, Turner & Steinkuehler (2018)

**WHO:**

NATIONAL CITY RESIDENTS BETWEEN THE AGES OF 13-17.

**WHAT:**

FILL OUT AND TURN IN THIS PACKET.

**WHERE:**

CASA DE SALUD

1408 HARDING AVE, NATIONAL CITY, CA 91950

**WHEN:**

SIGN UP A.S.A.P. STARTING JANUARY 6TH  
MONDAY - WEDNESDAY 3PM - 7PM  
SPACE IS LIMITED!

**PROGRAM DAYS AND HOURS:**

MONDAY - WEDNESDAY 3PM - 7PM

**CONTACT:**

CASA DE SALUD

(619) 336-6757 MONDAY - FRIDAY 3PM - 7PM

PROGRAM SUPERVISOR: ELYANA DELGADO

(619)336-4290 MONDAY - THURSDAY 7AM - 6PM

EDELGADO@NATIONALCITYCA.GOV



### **REGISTRATION:**

**All parents/guardians will need to pick up and submit this packet to the E-sports Coordinators at Casa De Salud. Once completed, the youth will become members of Casa De Salud.**

### **FEES:**

**Casa De Salud Youth Center offers a free after school program. Attending Casa De Salud Youth Center is a privilege and Casa De Salud Members are expected to comply with all rules and maintain good behavior.**

### **STAFF:**

**The Casa De Salud staff consists mostly of college students and/or graduates with a variety of majors to include recreation and child development majors. All recreation staff are CPR, First Aid, and AED certified. In addition, staff go through the Live Scan fingerprinting process. The City of National City and Community Services Department conducts bi-monthly staff meetings with focused training. The staff strives to make Casa De Salud an exemplary youth program!**

### **PARENT COMMUNICATION:**

**We strongly encourage parent communication and cooperation with the staff. Good communication with each parent helps Casa De Salud staff relate to the children most effectively. Please feel free to communicate any special needs or address any concerns that you may have to the staff. The staff will inform you of any behavioral concerns regarding your child when necessary. Under no circumstances should a parent of one child attempt to discipline another child. In such a case, please address your concerns to staff.**

### **CHILDREN USE OF OFFICE PHONE:**

**Phone use is made available to children only to get in contact with parent/guardian or in an emergency. Casa De Salud Members are to always ask a staff member for permission before using the phone. A staff member will accompany all children in the office while using the phone to talk to a parent/guardian to verify any change of plans, etc.**

### **EMERGENCY INFORMATION:**

**In the event of an accident or emergency, parents/guardians will be contacted immediately. If we are unable to reach you, we will contact those listed on the youth registration form. If no one can be reached, we will seek emergency medical care by calling 911.**

**Please make sure all the information on your child's registration form is current and accurate. If you move or change phone numbers (work, cell, or home), please make sure that the information on your emergency forms is updated immediately.**

### **HOMEWORK & TUTORING CLUB:**

**Homework & Tutoring Club will be offered Monday-Thursday from 3:30 pm – 4:30 pm. The club is separate from the E-sports program but available within the same building. times are subject to change depending on demand. The club will be led by recreation staff and will be structured to begin with group homework assistance and one on one tutoring available as requested. This will be a time for students to complete their homework and ask any questions they may have from our staff. Staff will be available to help with homework, but it is the parent/guardian's responsibility to ensure their child has completed all their homework. A separate registration packet is required for this program. Please ask the staff at Casa De Salud.**

### **SNACKS:**

**Snacks will be provided daily. Please make sure the staff is aware of all food allergies and/or dietary restrictions.**

### **CASA BUCKS INCENTIVE PROGRAM:**

**Casa Members are rewarded for their outstanding behavior, positive attitude, and program participation by receiving Casa Bucks. Casa Bucks are a part of our incentive program where Members can redeem their awarded Casa Bucks for delicious goodies or other prizes during operating hours. Casa Bucks are distributed by staff members based on behavior, positivity, and participation. Casa Bucks cannot be sold or traded for actual money. If a member is found using Casa Bucks unlawfully, they will be confiscated by staff and further disciplinary action will take place.**



### **CASA MARKET:**

**When Casa Members have earned a sufficient amount of Casa Bucks, they can redeem them for goodies or save them for prizes. Casa Market is available to Casa Members during operating hours. We encourage members to be responsible and remember to bring their Casa Bucks in order to redeem goodies and prizes for the Casa Market.**

### **RECYCLING PROGRAM:**

**Another great way for Casa Members to earn Casa Bucks is by bringing in recyclables such as plastic bottles and aluminum cans. The recycling program teaches Casa Members to learn the ways in which they are helping the environment while fundraising for the Casa de Salud Youth Center. Funds from the recycling program are used for field trips, activities, special events, professional and academic workshops, and other commodities not covered by the grants awarded to Casa de Salud Youth Center. The amount of Casa Bucks given to a Casa Member for bringing in recyclables will depend on the amount they bring.**

### **PERSONAL PROPERTY:**

**We provide all the Equipment and materials your child needs. The Casa De Salud staff will not be responsible for personal items. Please do not send items or valuable games that could be stolen, lost or broken. Casa De Salud Youth Center will provide the necessary materials for the activity and programs each day. Your child may bring their own controller and/or headphones, which is not necessary, but they must assume all responsibility for their own belongings. Children using cell phones will be asked to put them away if necessary. The City of National City Community Services Department is not responsible for the children's personal belongings.**

### **TRAVELING:**

**Traveling to events will be scheduled, as time and funds permit. In the special case of an event, parents will be notified. Special permission slips will be sent home to be signed by a parent/guardian before children can attend any event.**

## **DISCIPLINE POLICY**

**It is the desire of the recreation staff that all children enjoy their time in the program; however, abiding by age-appropriate rules is expected of all children. To prevent the need for discipline, the City of National City Community Services Department staff utilizes positive reinforcement techniques while communicating with the children. Recreation staff recognizes and rewards appropriate behavior. If there is a need for discipline, appropriate action will be taken.**

**The procedures used by the staff are designed to be fair, consistent and effective. First, the staff and child will discuss the inappropriate behavior and expectations of the child. If the problem continues, the child could have: a warning, a call to parents/guardian and/or have participation privileges be taken away. Youth may be removed from the situation, if this is deemed necessary, but will at no time be left alone. Parents will be notified when the youth misbehaves. Continuous or major disciplinary problems could result in your child being suspended or expelled from the program. It is essential that parents and staff work together to make each day an enjoyable day for all children that attend.**

**Unacceptable Behavior (includes but is not limited to):**

- Using foul language**
- Disrespecting another youth, staff, parents/guardians**
- Fighting**
- Refusing to take part in activities**
- Ignoring or disobeying safety rules**
- Public or inappropriate displays of affection**
- Defacing property or vandalism**
- Stealing**

**Zero Tolerance Behavior – Behavior that threatens or harms another person (adult or child) will not be tolerated. If your child exhibits this type of behavior, you will immediately be called to pick up your child, and services will be terminated. Types of zero tolerance behavior include: fighting, violence with the intent to harm (physical, mental or emotional), action deemed to be inappropriate or dangerous to themselves or others, aggressive intimidation, theft, destruction of property, carrying objects that would be deemed a weapon, possession of tobacco, alcohol, or illegal substances. All Children and Parents are required to sign the Code of Conduct Form in the this packet.**

### **CASA MEMBER SCAN IN:**

**All participants must scan-in upon arrival to Casa De Salud and before participating in any activity.**

**The Casa De Salud Staff Responsibility Begins When Your Child Enters & Scans-in to the Program.**

### **CASA MEMBER SIGN OUT:**

**If you wish for your child to sign themselves out and walk home, you must complete the walk home authorization form attached to this parent packet. In the interest of your child's safety, after a child signs themselves out and leaves Casa De Salud he or she may not return until the following day. The primary reason for this is to encourage Casa Members to stay at the youth center for as long as possible, rather than leave the premises unsupervised. Youth are expected to be present for the whole program Monday - Wednesday 3pm - 7pm. Parents must let staff know in writing if youth needs to leave early.**

**If you give your child permission to sign themselves out and walk home, please specify a time. If this is constant the program supervisor will need to approve, we will prioritize youth who can attend the full program.**

### **LATE PICK UP :**

**The closing time of the program are Monday-Wednesday at 7:00 p.m. You must pick up your child by this time. Late pick-ups after closing of Casa de Salud Youth Center are not allowed. Should you be delayed please contact staff at (619)336-6757, it is required that you make arrangements for another authorized person to pick up your child. Should any child be left after the closing the following action will be taken:**

**If parent/guardian is more than 5 minutes late, staff will call the parent. If parent/guardian cannot be reached, staff will call people from the authorized pick-up and/or emergency pick-up list. If more than 30 minutes past closing time with no contact from the parent or emergency contacts, National City Police Department will be called to pick up the child. Staff realize that emergencies do happen and ask families to communicate with us if needed.**

**If a parent/guardian is late to pick up a child three times they will have the youth's membership suspended for three months. If you wish for your children to walk home, please sign the attached walking home authorization form.**

### **PARENT VOLUNTEER & VISITATION POLICY:**

**The City of National City and Community Services Department is committed to providing safe and quality programs for your children. For the safety of the children at the Casa De Salud Youth Center, The City of National City does not allow parents to volunteer at Casa De Salud Youth Center unless given permission by the supervisor and completing a background check. Parent volunteers will only be used at Casa De Salud for one day special events. Any parent that wishes to volunteer will have to go through The City of National City's volunteer background check and fingerprinting (for more information on volunteering please call or email program supervisor).**

**Parents are also not permitted to make extended visits during program hours. If you need to drop off a snack or talk to your child during program hours and you are not checking your child out, please limit your visit to less than five minutes. Engaging in activities or interacting with other children during program hours is prohibited. The limited visitation time allows for our staff to have better supervision of the children, limit their exposure to strangers and ensure a safe environment. If a parent/guardian needs to accompany their child while at Casa De Salud for any special circumstances, please contact the Recreation Supervisor at (619) 336-4352.**

### **SPECIAL EVENT DAYS & PARENT DAYS:**

**A few times a year there will be special events held at Casa De Salud where parent(s)/guardian will be invited to attend. Staff will hand out special fliers for these days to inform you of dates and times.**

### **PHOTOGRAPHS:**

**City staff wearing City ID Badges will occasionally visit Casa De Salud with a camera (video and photograph) in hand. The City of National City may use your children(s) photographs and images for the purpose of publicizing and marketing City activities, educational purposes and City Meetings. No compensation will be given for use of these photographs and these images will become the sole property of the City of National City.**

# **All Forms Attached Must Be Completed and Returned to Casa De Salud**

- 1. Pick up Authorization**
- 2. Registration Form**
- 3. Esports Agreement Form**
- 4. Understanding Rules**
- 5. Contact Info**
- 6. Code of Conduct**
- 7. Walk Home Authorization Form**
- 8. Parent Visitation Agreement**
- 9. Program Beneficiary Survey**



# Pick-Up Authorization

**All Casa Members MUST be picked up by the parent/guardian or identified and authorized person unless they are allowed to walk home.  
Please indicate below who is authorized to pick up your child if different from above.**

**My child is authorized to be picked up by:**

**Full Name**\_\_\_\_\_ **Phone**\_\_\_\_\_

**Full Name**\_\_\_\_\_ **Phone**\_\_\_\_\_

**Full Name**\_\_\_\_\_ **Phone**\_\_\_\_\_



# REGISTRATION FORM

Adult/Guardian Last Name	FIRST	MI
Address	City	Zip
Home Phone	Cell Phone	
Email	Birthday	Circle One: Resident Non-Resident

Emergency Contact	Phone Number	Relationship

## PARTICIPANT INFORMATION - PLEASE PRINT

\*Does the participant need special accommodations for a successful

Class/Activity Number & Title	Participant's Last Name	FirstName	MI	Sex	Date of Birth	Fee	Y*N*

**TOTAL FEES DUE** \$  

## Release from Liability, Indemnification, Assumption of Risk, and Photographic Release ("Release"). (Please read before signing.)

I \_\_\_\_\_ (PARTICIPANT), and I \_\_\_\_\_ \*(PARTICIPANT'S parent or guardian),

In consideration for being permitted by the City of National City (the "City") to participate in the above-listed recreational activities for which I am registering, I hereby sign this Release. I acknowledge that this Release is intended to waive, release, and discharge in advance the City, its officers, employees, agents, and volunteers from any and all liability arising out of, or connected in any way with, my participation in the above-listed recreational activities, even though I may suffer injury, death, or damage arising out of the negligent, intentional, or other acts, howsoever caused, on the part of the City, its officers, employees, agents, or volunteers. I understand that the above-listed activities involve an element of risk and danger of accidents, including injury, death, and property loss, and, knowing those risks, I hereby assume those risks. I agree to indemnify, as well as waive, release, discharge, and hold harmless the City, its officials, employees, agents and volunteers from any and all claims, liability, damages, suits, losses, or related causes of action for damages, including but not limited to claims that may result from any injury, death, or damage, accidental or otherwise during, or arising in any way from my participation in, the above-listed recreational activities. I further agree that this Release shall be binding on my heirs, successors, executors, administrators, and assigns.

I further consent to the unrestricted use by the City, or any person authorized by the City, of any photographs, recordings, interviews, videotapes, motion pictures or similar visual or auditory recording ("Media") of the participant named on this form in connection with the above-listed activities. I understand that this Media may be edited, copied, exhibited, published or distributed by the City, and I waive any rights to this Media that may exist under the Visual Artists Rights Act, the California Art Preservation Act, and the right to inspect or approve the finished product in which my likeness appears. Additionally, I waive any right to royalties or other compensation arising out of or related to the Media described above. I also understand that this Media may be electronically displayed via the Internet or in a public educational setting. There is no time limit on the validity of this Release and there is no geographic limitation where this Media may be distributed.

REGISTRANT's / Parent or Guardian's Signature: \_\_\_\_\_

REGISTRANT's / Parent or Guardian's Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Registration Questions? Call 619-336-4290 or send us and e-mail to: [communityservices@nationalcityca.gov](mailto:communityservices@nationalcityca.gov)

**We Pledge to Provide Commitment, Courtesy, Collaboration, Communication, Customer Service**

Make checks payable to "City of National City" \*Individuals who do not reside within the city limits of National City must pay the nonresident fee listed for each class. **Please pay in person at the Finance Department Located at:**  
**1243 National City Blvd. National City, CA 91950 phone (619) 336-4330**

FOR OFFICE USE ONLY: Amount Due: \$ \_\_\_\_\_ Date Paid \_\_\_\_\_ Cash, Check, Credit Card Received By \_\_\_\_\_

## ESPORTS AGREEMENT CONTRACT

**This Video Game Agreement represents a significant investment from the National City Community Services Department. The audio and video equipment has been funded and provided at a very expensive cost; therefore, we expect everyone to treat the equipment with respect and responsibility. The ability to use this equipment is a privilege. Casa De Salud staff reserves the right to suspend that privilege to anyone at any time for any reason.**

**Esports Members must be at least 13 years old to use any video game equipment. Parents must have completed and signed required membership forms before they can use any equipment. The use of equipment will be monitored by staff for the safety of Esports Members. Casa De Salud has the right to limit the number of students using the room.**

### **Video/Game Room Rules:**

- \* Foul language is not permitted.**
  - \* Do not misuse the equipment.**
  - \* Do not change games or adjust video or audio. If you need assistance, ask staff for help.**
  - \* Only games previewed and authorized by Casa de Salud Supervisor will be allowed.**
- Only games with the following rating are allowed, but must first be approved by Casa de Salud Supervisor.**

### **EVERYONE**



**Titles rated E (Everyone) have content that may be suitable for persons ages and older. Titles in this category may contain minimal cartoon, fantasy or mild violence and/or infrequent use of mild language.**

### **EVERYONE 10+**



**Titles rated E10+ (Everyone 10+) have content that may be suitable for ages 10 and older. Titles in this category may contain more cartoon, fantasy or mild violence, mild language, and/or minimal suggestive themes.**

### **TEEN**



**Titles rated T (Teen) have content that may be suitable for ages 13 and older. Titles in this category may contain violence, suggestive themes, crude humor, minimal blood, simulated gambling, and/or infrequent use of strong language.**

### **MATURE**



**Titles rated M (Mature) have content that may be suitable for persons ages 17 and older.**

## **ESPORTS AGREEMENT CONTRACT**

**I have carefully read the Video Game Agreement Contract. I have had the opportunity to ask questions and have them answered. I am confident that I fully know and understand all rules and guidelines for using the Video/Game Room at Casa de Salud. I, the student, agree to follow all rules outlined above. I understand that failure to comply with these rules will result in disciplinary action.**

**Student Name:** \_\_\_\_\_

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**I have carefully read the Video Game Agreement Contract. I have had the opportunity to ask questions and have them answered. I am confident that I fully know and understand all rules and guidelines for using the Video/Game Room at Casa de Salud. I, the parent/guardian of the above-named student, do hereby give my approval of his/her use of the Video/Game Room and the approved video game content containing any of the aforementioned ratings.**

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Damages to the equipment will be handled as follows:**

**\* If any of the equipment is damaged or not working properly, notify staff immediately to ensure that you do not incur any fault.**

**\* Intentional damage or theft of any equipment will result in privileges taken away and/or expulsion from Esports program.**

**\* Casa Members who fail to return any equipment will have to meet with the Casa de Salud Supervisor immediately to determine their Video Game participation.**

### **CONSEQUENCES FOR NOT ABIDING TO THE RULES:**

**\* Minor Offense = Casa Member will be asked to leave the Video/Game Room if they do not comply with the above rules, or any other rules imposed by Casa De Salud**

**\* Major Offense or Second Minor Offense = Video/Game Room privileges will be suspended for one week. Parent(s) will be contacted.**

**\* Continued Offense = Video/Game Room privileges will be suspended for minimum of 2 months and student will have to meet with the Casa de Salud supervisor.**

**I have read all the rules and guidelines for using the Video/Game Room at Casa de Salud and I agree to follow them. I will be respectful and responsible while using the equipment issued to me. I understand that using this Video Game/Room is a privilege and that my actions will decide my privileges to the Video/Game Room equipment at Casa de Salud.**

**Parent/Guardian Name: \_\_\_\_\_**

**Parent/Guardian Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**\*Participants who turn 18 while enrolled in the program can no longer participate but can return as a volunteer to assist the ESPORTS program.**



# CONTACT INFO

**PARENT/GUARDIAN, PLEASE FILL OUT TO  
STAY UPDATED!**  
(YOU WILL BE ADDED TO EMAIL LIST)

**NAME:**

---

**ADDRESS:**

---

**PHONE:**

---

**EMAIL:**

---

☐ **OPT OUT OF CITY EMAIL LIST**

# Code of Conduct

The code of conduct is as follows:

- I will honor the Casa De Salud Youth Center member code of conduct.
- I will respect myself, fellow members, staff, and the facility.
- I will scan in upon arrival and scan out as I am leaving the facility.
- I will remain drug, alcohol and tobacco free.
- I will use appropriate language.
- I will be responsible for all my personal belongings.
- I will cooperate with all directions and requests by all staff.
- I will keep my hands, feet, and any other parts of the body to myself.
- I will eat or drink only in designated areas and dispose of garbage properly.
- I will use only assigned Enter and Exit ways to enter and exit the Youth Center.
- I will remain free of weapons including those that resemble real weapons with peaceful intentions.

I agree to follow all rules outlined above. I understand that failure to comply with these rules will result in disciplinary action. Actions for offense are as follows:

**First Offense: Verbal Warning**

**Second Offense: A call to parents will be made**

**Third Offense: A one week suspension from Casa de Salud**

**Fourth Offense: Indefinite suspension, return to Casa de Salud may be granted once parent/guardian, youth and program supervisor meet to sign a behavior contract that all parties agree upon.**

**\* If first offense is severe then appropriate measures will be taken by the program supervisor. \***

**Member Name (PRINT):** \_\_\_\_\_

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Please sign as acknowledgement and receipt of the Manuel Portillo Casa De Salud Youth Center Code of Conduct. I understand that I am responsible for reviewing the Code of Conduct with my child and will assist Manuel Portillo Casa De Salud Youth Center in adhering to the principals of the Code of Conduct.**

**Parent/Guardian Name (PRINT):** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This form will remain in your child's file**

# Walk Home and/or Child sign in/out without Parent Authorization Form

**Valid from July 1, 2021, to June 30, 2022.**

(Form is only valid during those dates; new form will be required every July.)

**Dear Parent or Guardian:**

**For the safety and security of our program Casa Members, parents/guardians or authorized persons are required to pick up child from Casa de Salud Youth Center. If your child is 12 years old or older, you have the option to give them permission to walk home alone from Casa de Salud. We must have this form signed and returned to the Casa de Salud Youth Center. Your child will not be allowed to leave the after-school program unaccompanied until this form has been turned into a City of National City recreation staff in person. Copies of this form will be kept on file at Casa de Salud Youth Center. Please ensure you update this information accordingly should changes arise.**

I ☐ Do/ ☐ Do Not (check one) give permission for my Child/Children [print name(s)]:

Age(s): \_\_\_\_\_ Grade(s): \_\_\_\_\_ to sign themselves in and out and WALK HOME ALONE FROM CASA DE SALUD YOUTH CENTER. Please release my child: (30 min before sunset or specified time, be home by, til end of program, etc):

If you would like child to self sign in/out without a parent/guardian present but NOT allowed to walk home, check this box. ☐ (This is for when child's ride is outside and parking to come in will not be required)

*I am aware that once my child leaves the youth center, there is no adult supervision for them. I have made my child aware that, for their safety, they are not allowed to loiter around the premises after they sign out or at any nearby business, and they are to go directly to their destination. Once children scan out they are not allowed to scan back in until the next day.*

*I understand by signing this release that my child will not be supervised by an adult during this time and City of National City, or any of its employees may not be held responsible should anything happen to my child.*

Parent/Guardian Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Staff Receiving Form: \_\_\_\_\_ Date: \_\_\_\_\_

**When walking home, please remind your children of the following safety guidelines:**

- \*Go directly from Casa de Salud to your home or designated place.**
- \*Youth should only return to Casa de Salud Youth Center in the event of an emergency.**
- \*Walk home using the sidewalk or walking path, cross only at designated crosswalks.**
- \*Obey all traffic signs and signals.**
- \*Check in with a parent or other designated adult/sibling when you get home.**

# Parent Visitation Agreement

**Dear Parents or Guardians:**

**Casa de Salud Youth Center is a supervised recreational drop-in program for youth between the ages of 8-17 years old. Casa de Salud Youth Center has been awarded funding which limits the age range of those allowed to participate in programing and entering the facility. No parents, former employees or volunteers, family members, etc., are allowed to enter the facility unless it is for pick up and drop off purposes and they will only be allowed into the lobby area. City Staff and authorized volunteers are the only individuals allowed in the Casa de Salud Youth Center during operating hours.**

**Having unauthorized personnel in the facility puts the Casa de Salud Youth Center at risk for losing its awarded funding therefore eliminating the programing and activities available to the community. The City of National City and Community Services Department is committed to providing safe and quality programs for the community. For the safety of the members at Casa De Salud Youth Center, The City of National City does not allow parents to enter the Casa De Salud Youth Center.**

**If parents or individuals over the age of 18 are found in the facility during operating hours, they will be asked to leave immediately. Parents are not permitted to make extended visits during operating program hours. If you need to drop off a snack or speak to your child during operating hours, please limit your visit to less than five minutes. The limited visitation time allows for our staff limit Casa Members' exposure to strangers and ensure a safer environment.**

**There will be special events held throughout the fiscal year at Casa De Salud Youth Center where parent(s)/guardian will be invited to attend. Staff will distribute fliers for these days to inform you of dates and times. Special events calendars will be located at the sign in desk for parents to learn more about special events and other programing.**

***I am aware that once my child enters the youth center, I am not permitted to enter the Casa de Salud Youth Center unless there is a special event where parents or community members are invited. By signing this release, I understand that I will be asked to leave or escorted out of the facility if I am in the youth center during operating hours.***

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

# PROGRAM BENEFICIARY DATA FOR CDBG/HOME FUNDED PROJECTS

Your cooperation in filling out this form is requested. Record keeping on the participant's income in the \_\_\_\_\_ Program is a condition of receipt of federal funds. The information provided on this form will remain confidential but may be subjected to verification by responsible local and federal agencies. Self-identification of race and ethnicity is voluntary.

What is the total number of persons in your household?	
Female head of household? Yes or No	Disabled/Special Needs? Yes or No
Seniors? Yes or No	Are you homeless? Yes or No
What is the total combined annual income of all members of your household?	

Household Size	At or Under 30% AMI*	Over 30% to 50% AMI*	Over 50% to 80% AMI*	Over 80% AMI*
1	\$0 - \$25,450	\$21,451 - \$42,450	\$42,451 - \$67,900	\$67,901 & Above
2	\$0 - \$29,100	\$27,751 - \$48,550	\$48,551 - \$77,600	\$77,601 & Above
3	\$0 - \$32,750	\$31,201 - \$54,500	\$54,501 - \$87,300	\$87,301 & Above
4	\$0 - \$36,350	\$34,651 - \$60,600	\$60,601 - \$97,000	\$97,001 & Above
5	\$0 - \$39,300	\$37,451 - \$65,450	\$65,451 - \$104,800	\$104,801 & Above
6	\$0 - \$42,000	\$40,201 - \$70,300	\$70,301 - \$112,550	\$112,551 & Above
7	\$0 - \$45,100	\$43,001 - \$75,150	\$75,151 - \$120,300	\$120,301 & Above
8	\$0 - \$48,000	\$45,751 - \$80,000	\$80,001 - \$128,050	\$128,051 & Above

(Note: \*Area Median Income listed above is for 2021, and new limits are released each year. To obtain updated information, go to the [HUD Exchange](https://www.hudexchange.info) and search for income limits for the San Diego area.)

**ETHNICITY:** Please check the box below that describes your family ethnicity.

Hispanic/Latino (a)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
---------------------	------------------------------	-----------------------------

**RACE:** Please **ALSO** check the box below that best describes your family race.

Single Race Categories	Multiple Race Categories
<input type="checkbox"/> White	<input type="checkbox"/> American Indian / Alaskan Native & White
<input type="checkbox"/> Black	<input type="checkbox"/> Asian & White
<input type="checkbox"/> Asian	<input type="checkbox"/> Black / African American & White
<input type="checkbox"/> American Indian / Alaskan Native	<input type="checkbox"/> American Indian / Alaskan Native & White
<input type="checkbox"/> Native Hawaiian / Other Pacific Islander	<input type="checkbox"/> Other or Multi-racial (please specify): _____

**APPLICANT STATEMENT:** I hereby certify that the information on this form is accurate and complete. I understand that this self-certification may be subject to further verification by the agency providing services, the City, or the U.S. Department of Housing & Urban Development. I, therefore, authorize such verification, and I will provide supporting documents to include documentation on all income sources if necessary. **WARNING:** Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the U.S. Government.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
(Print)

Household Address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# PARTICIPANT SURVEY

WHICH GAMES ARE YOU  
INTERESTED IN TO PLAY  
COMPETITIVELY?

CALL OF DUTY

☐

LEAGUE OF LEGENDS

☐

DOTA 2

☐

MARIO KART

☐

SMASH BROS

☐

MARVEL VS CAPCOM

☐

STREET FIGHTER

☐

VALORANT

☐

APEX LEGENDS

☐

OTHER:

---

---